

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			10 12 21 11
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			12 20 12

1143

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	9/9/03 9/9/03 8/24/06
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Claim	Date
Final Original	4/06
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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